

U.S. ENVIRONMENTAL PROTECTION AGENCY

RISK MANAGEMENT PROGRAM INSPECTION REPORT

FACILITY NAME AND ADDRESS JCI Jones Chemicals, Inc.- Riverview Facility 1000 E. Ave. Riverview, MI 48192	INSP. START DATE / TIME: 08/23/2006, 9:00am INSPECTION END DATE/ TIME: 08/23/2006, 2:00pm	RMP SUBMITTAL DATE: Initial: 06/16/1999 Updates: 08/31/1999, 06/19/2004
RESPONSIBLE OFFICIAL: Monika Chruszcz	TITLE Environmental Engineer	PHONE NUMBER (312) 886-0181
FACILITY REPRESENTATIVE(S), Donald Shek Mike Dionne Pam Nowaske	TITLE(S) VP of Safety Maintenance Office Manager	PHONE NUMBER(S) (734) 283-0677 CONTACTED <input checked="" type="checkbox"/> yes <input type="checkbox"/> no

INSPECTION FINDINGS

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated, X = Not Applicable)

<input checked="" type="checkbox"/> Management Systems <input checked="" type="checkbox"/> Five Year Accident History <input checked="" type="checkbox"/> Compliance Audits (3 year) <input checked="" type="checkbox"/> Certifications <input checked="" type="checkbox"/> Contractors <input checked="" type="checkbox"/> Implementation of Program	<input checked="" type="checkbox"/> Hazard Assessment <input checked="" type="checkbox"/> OCA Parameters <input checked="" type="checkbox"/> Alt Release Scenario <input checked="" type="checkbox"/> Review and Update <input checked="" type="checkbox"/> Haz Assess. Back Up Docs <input checked="" type="checkbox"/> Offsite Impact Analysis	<input checked="" type="checkbox"/> Emergency Response Program <input checked="" type="checkbox"/> Prevention Program <input checked="" type="checkbox"/> Process Hazard Analysis <input checked="" type="checkbox"/> Mechanical Integrity <input checked="" type="checkbox"/> Hot Work Permit <input checked="" type="checkbox"/> SOP's	<input checked="" type="checkbox"/> Process Safety <input checked="" type="checkbox"/> Management of Change <input checked="" type="checkbox"/> Training <input checked="" type="checkbox"/> Incident Investigation <input checked="" type="checkbox"/> Employee Participation
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Section C: Applicability

Program Level	Regulated Substance	LEPC	Attachments
Program Level 3	Chlorine		
Program Level 3	Sulfur Dioxide		

Section D: Process Description (attach additional sheets if necessary)

JCI Jones Chemicals, Inc., Riverview, MI, facility distributes and repackages inorganic chemicals and gases into packages that can be transported and further used by manufacturers and other facilities. JCI Jones Chemicals also supplies chlorine and sodium hypochlorite to facilities that disinfect bulk water systems. The Riverview facility has been in operation for over 50 years, working two shift, Monday thru Friday. The facility has 13 employees, 4 of which work directly with chlorine and sodium hypochlorite, the others of which can at some point be exposed to these same chemicals. The facility receives chlorine in 90 ton railcars, approximately twice a week, Tuesday and Thursday's. On average, 15-20 ton containers are filled per day, with scales shutting off the filling process at 2,000 lbs. The lines run from the rail cars, underground into the filling stations for the ton containers. As for Sulfur Dioxide, the facility stopped receiving ton container on July 7th, 2006. The JCI Jones Chemicals facility in Ohio, is the main supplier of the sulfur dioxide now used at the plant, and stored in 150 lb. containers. The Riverview facility is a Program Level 3 facility.

SECTION E: SUMMARY FINDINGS/COMMENTS (Attach additional sheets if necessary)

On August 22, 2006, a Risk Management Program inspection was conducted at the JCI Jones Chemicals, Inc. facility in Riverview, MI. The purpose of the inspection was to determine the facility's compliance with Risk Management Program, or CAA 112(r) regulations. Donald Shelc, the Vice President of Safety, greeted the inspector and was notified that the inspector would need to see documentation as well as take a walk through of the facility, especially taking note of the areas of the facility that contained chlorine and sulfur dioxide.

Of the facility walk thru, the inspector walked through areas of the facility that stored and repackaged chlorine and sulfur dioxide. Please see attached pictures. On the walk through, 2 rail cars of chlorine were on site, one of the rail cars was actually connected to the process for filling and repackaging. 3 ton containers were being filled at the time of the inspection. 24 full ton containers were stored up on the hill, 8 were stored in the filling room. All chlorine lines were labeled vacuum or liquid accordingly. In addition, the facility repackages 150 lb. cylinders on site. At the time of the inspection there were 4 full cylinders, with 1 additional cylinder being filled. There were 18 full - 150 lb. sulfur dioxide cylinders on site at the time of the inspection. These cylinders were stored near the label station of the facility. These cylinders are not repackaged. In addition, there were 6 full ton cylinders up on the hill being stored.

Sensors are within the building and are set to detect and alarm at 1ppm and 2.5 ppm, which requires a full shutdown.

The following recommendations and violations are being noted as a result of reviewing documentation and interviewing individuals during the RMP inspection:

Management of Change

The owner or operator must make sure that they date off their MOC's.

Incident Investigations

At the time of the inspection, a 4/2002 incident was reported on the facilities submitted RMP. This release does not have to be reported on the RMP because it does not involve the RMP processes identified.

Hot Work Permits

The owner or operator should make sure that all hot work permits are signed off accordingly.

Contractors

68.87(b)(1) The owner or operator must maintain documentation according to its procedures, for all contractors working on site. At the time of the inspection, it was identified that Powell Fabrications and Manufacturing, Inc. and Peck Electric are primary contractors at the facility. Safety information regarding Powell was available, but safety information for Peck Electric was not available.

RMP

68.195(b) Tim Venier was listed as the emergency contact for the facility and no longer works for the company. The facility must make sure that emergency contact information is updated within 30 days of his departure.

At the conclusion of the Inspection, an exit interview was conducted, where potential areas of concern and possible violations were noted. At this time, the inspector also notified the owner or operator of possible responses that can be received as a response to the Inspection performed.

and Signature(s) of Inspector(s):
Monica Chrzaszcz

Agency/Office/Telephone number
Superfund/CEPPS/ (312) 886-0181

Date
09/20/2006

RI ANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET
Program Level 3 Process Checklist

Facility Name: JCI Jones Chemicals, In., 1800 Payne Ave., Riverview, MI 48192

Date RMP submitted: Initial: 06/16/1999, Update: 08/31/1999, Update 06/19/2004

Date process(es) came online: 1958

All comments and suggestions are in bold and italicized.

Section A-Management [68.15]

Management system developed and implemented as provided in 40 CFR 68.15?

☒ S ☐ M ☐ U ☐ N/A

Comments:

Has the owner or operator:

1. Developed a management system to oversee the implementation of the risk management program elements? [68.15(a)]

☒ Y ☐ N ☐ N/A

2. Assigned a qualified person or position that has the overall responsibility for the development, implementation, and integration of the risk management program elements? [68.15(b)]

☒ Y ☐ N ☐ N/A

Dan Kasmey has been assigned overall responsibility for the development, implementation, and integration of the risk management program elements.

3. Documented other persons responsible for implementing individual requirements of the risk management program and defined the lines of authority through an organization chart or similar document? [68.15(c)]

☒ Y ☐ N ☐ N/A

At the time of the inspection, a listing of names, positions, and responsibilities in regards to RMP and PSM was reviewed.

S B: Hazard Assessment [68.20-68.42]

Hazard assessment conducted and documented as provided in 40 CFR 68.20-68.42?

☒ S ☐ M ☐ U ☐ N/A

Comments:

Hazard Assessment: Offsite consequence analysis parameters [68.22]

1. Used the following endpoints for offsite consequence analysis for a worst-case scenario: [68.22(a)]

☒ a. For toxics: the endpoints provided in Appendix A of 40 CFR Part 68? [68.22(a)(1)]

☐ b. For flammables: an explosion resulting in an overpressure of 1 psi? [68.22(a)(2)(i)]

or

☐ c. For flammables: a fire resulting in a radiant heat/exposure of 5 kw/m² for 40 seconds?

[68.22(a)(2)(ii)]

or

☐ d. For flammables: a concentration resulting in a lower flammability limit, as provided in NFPA documents or other generally recognized sources? [68.22(a)(2)(iii)]

☒ Y ☐ N ☐ N/A

2. Used the following endpoints for offsite consequence analysis for an alternative release scenario: [68.22(a)]

☒ a. For toxics: the endpoints provided in Appendix A of 40 CFR Part 68? [68.22(a)(1)]

☐ b. For flammables: an explosion resulting in an overpressure of 1 psi? [68.22(a)(2)(i)]

☐ c. For flammables: a fire resulting in a radiant heat/exposure of 5 kw/m² for 40 seconds? [68.22(a)(2)(ii)]

☐ d. For flammables: a concentration resulting in a lower flammability limit, as provided in NFPA documents or other generally recognized sources? [68.22(a)(2)(iii)]

☒ Y ☐ N ☐ N/A

3. Used appropriate wind speeds and stability classes for the release analysis? [68.22(b)]

☒ Y ☐ N ☐ N/A

4. Used appropriate ambient temperature and humidity values for the release analysis? [68.22(c)]

☒ Y ☐ N ☐ N/A

5. d appropriate values for the height of the release for the release analysis? [68.22(d)]

☒ Y ☐ N ☐ N/A

6. Used appropriate surface roughness values for the release analysis? [68.22(e)]

☒ Y ☐ N ☐ N/A

MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET
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Facility Name: JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

7. Do tables and models, used for dispersion analysis of toxic substances, appropriately account for dense or neutrally buoyant gases? [68.22(f)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
8. Were liquids, other than gases liquefied by refrigeration only, considered to be released at the highest daily maximum temperature, based on data for the previous three years appropriate for a stationary source, or at process temperature, whichever is higher? [68.22(g)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

Hazard Assessment: Worst-case release scenario analysis [68.25]

9. Analyzed and reported in the RMP one worst-case release scenario estimated to create the greatest distance to an endpoint resulting from an accidental release of a regulated toxic substance from covered processes under worst-case conditions? [68.25(a)(2)(i)] <i>The worst case release scenario analyzed a release of a rail car, 180,000 lbs. of chlorine over 10 minutes, which resulted in a release rate of 18,000 lbs.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
10. Analyzed and reported in the RMP one worst-case release scenario estimated to create the greatest distance to an endpoint resulting from an accidental release of a regulated flammable substance from covered processes under worst-case conditions? [68.25(a)(2)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
11. Analyzed and reported in the RMP additional worst-case release scenarios for a hazard class if the a worst-case release from another covered process at the stationary source potentially affects public receptors different from those potentially affected by the worst-case release scenario developed under 68.25(a)(2)(i) or 68.25(a)(2)(ii)? [68.25(a)(2)(iii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
12. Has the owner or operator determined the worst-case release quantity to be the greater of the following: [68.25(b)] <input checked="" type="checkbox"/> a. If released from a vessel, the greatest amount held in a single vessel, taking into account administrative controls that limit the maximum quantity ? [68.25(b)(1)] <input type="checkbox"/> b. If released from a pipe, the greatest amount held in the pipe, taking into account administrative controls that limit the maximum quantity? [68.25(b)(2)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
13a. Has the owner or operator for <u>toxic substances</u> that are <u>normally gases</u> at <u>ambient temperature and handled as a gas or liquid under pressure</u> :	
13.a.(1) Assumed the whole quantity in the vessel or pipe would be released as a gas over 10 minutes? [68.25(c)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
13.a.(2) Assumed the release rate to be the total quantity divided by 10, if there are no passive mitigation systems in place? [68.25(c)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
13.b. Has the owner or operator for <u>toxic gases</u> handled as <u>refrigerated liquids at ambient pressure</u> :	
13.b.(1) Assumed the substance would be released as a gas in 10 minutes, if not contained by passive mitigation systems or if the contained pool would have a depth of 1 cm or less? [68.25(c)(2)(i)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.b.(2) [Optional for owner / operator] Assumed the quantity in the vessel or pipe would be spilled instantaneously to form a liquid pool, if the released substance would be contained by passive mitigation systems in a pool with a depth greater than 1 cm? [68.25(c)(2)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.b.(3) Calculated the volatilization rate at the boiling point of the substance and at the conditions specified in 68.25(d)? [68.25(c)(2)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c. Has the owner or operator for <u>toxic substances</u> that are <u>normally liquids at ambient temperature</u> :	

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13.c.(1) Assumed the quantity in the vessel or pipe would be spilled instantaneously to form a liquid pool? [68.25(d)(1)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(2) Determined the surface area of the pool by assuming that the liquid spreads to 1 cm deep, if there is no passive mitigation system in place that would serve to contain the spill and limit the surface area, or if passive mitigation is in place, the surface area of the contained liquid shall be used to calculate the volatilization rate? [68.25(d)(1)(i)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(3) Taken into account the actual surface characteristics, if the release would occur onto a surface that is not paved or smooth? [68.25(d)(1)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(4) Determined the volatilization rate by accounting for the highest daily maximum temperature in the past three years, the temperature of the substance in the vessel, and the concentration of the substance if the liquid spilled is a mixture or solution? [68.25(d)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(5) Determined the rate of release to air from the volatilization rate of the liquid pool? [68.25(d)(3)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(6) Determined the rate of release to air by using the methodology in the RMP Offsite Consequence Analysis Guidance, any other publicly available techniques that account for the modeling conditions and are recognized by industry as applicable as part of current practices, or proprietary models that account for the modeling conditions may be used provided the owner or operator allows the implementing agency access to the model and describes model features and differences from publicly available models to local emergency planners upon request? [68.25(d)(3)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.d. Has the owner or operator for <u>flammables</u> :	
13.d.(1) Assumed the quantity in a vessel(s) of flammable gas held as a gas or liquid under pressure or refrigerated gas released to an undiked area vaporizes resulting in a vapor cloud explosion? [68.25(e)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.d.(2) For refrigerated gas released to a contained area or liquids released below their atmospheric boiling point, assumed the quantity volatilized in 10 minutes results in a vapor cloud? [68.25(f)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.d.(3) Assumed a yield factor of 10% of the available energy is released in the explosion for determining the distance to the explosion endpoint, if the model used is based on TNT-equivalent methods? [68.25(e)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
14. Used the parameters defined in 68.22 to determine distance to the endpoints? [68.25(g)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
15. Determined the rate of release to air by using the methodology in the RMP Offsite Consequence Analysis Guidance, any other publicly available techniques that account for the modeling conditions and are recognized by industry as applicable as part of current practices, or proprietary models that account for the modeling conditions may be used provided the owner or operator allows the implementing agency access to the model and describes model features and differences from publicly available models to local emergency planners upon request? [68.25(g)] a. What modeling technique did the owner or operator use? [68.25(g)] <i>RMP Comp was used for analysis.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
16. Ensured that the passive mitigation system, if considered, is capable of withstanding the release event triggering the scenario and will still function as intended? [68.25(h)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
17. Considered also the following factors in selecting the worst-case release scenarios: [68.25(i)] <input type="checkbox"/> a. Smaller quantities handled at higher process temperature or pressure? [68.25(i)(1)] <input type="checkbox"/> b. Proximity to the boundary of the stationary source? [68.25(i)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

Hazard Assessment: Alternative release scenario analysis [68.28]

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18. Identified and analyzed at least one alternative release scenario for each regulated toxic substance held in a covered process(es) and at least one alternative release scenario to represent all flammable substances held in covered processes? [68.28(a)] <i>For the alternative release scenario, two release scenarios were analyzed, one for chlorine and one for sulfur dioxide. Both analyzed a release from a connection of whip line and a valve at the ton cylinder filling station.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
19. Selected a scenario: [68.28(b)] <input checked="" type="checkbox"/> a. That is more likely to occur than the worst-case release scenario under 68.25? [68.28(b)(1)(i)] <input type="checkbox"/> b. That will reach an endpoint off-site, unless no such scenario exists? [68.28(b)(1)(ii)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
20. Considered release scenarios which included, but are not limited to, the following: [68.28(b)(2)] <input checked="" type="checkbox"/> a. Transfer hose releases due to splits or sudden hose uncoupling? [68.28(b)(2)(i)] <input type="checkbox"/> b. Process piping releases from failures at flanges, joints, welds, valves and valve seals, and drains or bleeds? [68.28(b)(2)(ii)] <input type="checkbox"/> c. Process vessel or pump releases due to cracks, seal failure, or drain, bleed, or plug failure? [68.28(b)(2)(iii)] <input type="checkbox"/> d. Vessel overfilling and spill, or overpressurization and venting through relief valves or rupture disks? [68.28(b)(2)(iv)] <input type="checkbox"/> e. Shipping container mishandling and breakage or puncturing leading to a spill? [68.28(b)(2)(v)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
21. Used the parameters defined in 68.22 to determine distance to the endpoints? [68.28(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
22. Determined the rate of release to air by using the methodology in the RMP Offsite Consequence Analysis Guidance, any other publicly available techniques that account for the modeling conditions and are recognized by industry as applicable as part of current practices, or proprietary models that account for the modeling conditions may be used provided the owner or operator allows the implementing agency access to the model and describes model features and differences from publicly available models to local emergency planners on request? [68.28(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
23. Ensured that the passive and active mitigation systems, if considered, are capable of withstanding the release event triggering the scenario and will be functional? [68.28(d)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
24. Considered the following factors in selecting the alternative release scenarios: [68.28(e)] <input type="checkbox"/> a. The five-year accident history provided in 68.42? [68.28(e)(1)] <input type="checkbox"/> b. Failure scenarios identified under 68.67? [68.28(e)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Hazard Assessment: Defining off-site impacts–Population [68.30]	
25. Estimated population that would be included in the distance to the endpoint in the RMP based on a circle with the point of release at the center? [68.30(a)] <i>Marplot was used for analysis.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
26. Identified the presence of institutions, parks and recreational areas, major commercial, office, and industrial buildings in the RMP? [68.30(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
27. Used most recent Census data, or other updated information to estimate the population? [68.30(c)] <i>At the time of the inspection, 2000 Census data was reviewed.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
28. Estimated the population to two significant digits? [68.30(d)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Hazard Assessment: Defining off-site impacts–Environment [68.33]	
29. Identified environmental receptors that would be included in the distance to the endpoint based on a circle with the point of release at the center? [68.33(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
30. Relied on information provided on local U.S.G.S. maps, or on any data source containing U.S.G.S. data to identify environmental receptors? [Source may have used LandView to obtain information] [68.33(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Hazard Assessment: Review and update [68.36]	

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31. Reviewed and updated the off-site consequence analyses at least once every five years? [68.36(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
32. Completed a revised analysis and submit a revised RMP within six months of a change in processes, quantities stored or handled, or any other aspect that might reasonably be expected on increase or decrease the distance to the endpoint by a factor of two or more? [68.36(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

Hazard Assessment: Documentation [68.39]

Has the owner/operator maintained the following records:

33. For worst-case scenarios: a description of the vessel or pipeline and substance selected, assumptions and parameters used, the rationale for selection, and anticipated effect of the administrative controls and passive mitigation on the release quantity and rate? [68.39(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
34. For alternative release scenarios: a description of the scenarios identified, assumptions and parameters used, the rationale for the selection of specific scenarios, and anticipated effect of the administrative controls and mitigation on the release quantity and rate? [68.39(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
35. Documentation of estimated quantity released, release rate, and duration of release? [68.39(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
36. Methodology used to determine distance to endpoints? [68.39(d)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
37. Data used to estimate population and environmental receptors potentially affected? [68.39(e)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Hazard Assessment: Five-year accident history [68.42]

38. Has the owner or operator included all accidental releases from covered processes that resulted in deaths, injuries, or significant property damage on site, or known offsite deaths, injuries, evacuations, sheltering in place, property damage, or environmental damage? [68.42(a)] <i>Owner or operator identified one accident on 10/20/2000, which included a 1 lb. release from human error, resulting in one injury. Information on this accident was included in documentation the facility had at the time of the inspection and in the submitted RMP.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
39. Has the owner or operator reported the following information for each accidental release: [68.42(b)] <input checked="" type="checkbox"/> a. Date, time, and approximate duration of the release? [68.42(b)(1)] <input checked="" type="checkbox"/> b. Chemical(s) released? [68.42(b)(2)] <input checked="" type="checkbox"/> c. Estimated quantity released in pounds and percentage weight in a mixture (toxics)? [68.42(b)(3)] <input checked="" type="checkbox"/> d. NAICS code for the process? [68.42(b)(4)] <input checked="" type="checkbox"/> e. The type of release event and its source? [68.42(b)(5)] <input checked="" type="checkbox"/> f. Weather conditions (if known)? [68.42(b)(6)] <input checked="" type="checkbox"/> g. On-site impacts? [68.42(b)(7)] <input checked="" type="checkbox"/> h. Known offsite impacts? [68.42(b)(8)] <input checked="" type="checkbox"/> i. Initiating event and contributing factors (if known)? [68.42(b)(9)] <input checked="" type="checkbox"/> j. Whether offsite responders were notified (if known)? [68.42(b)(10)] <input checked="" type="checkbox"/> k. Operational or process changes that resulted from investigation of the release? [68.42(b)(11)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Section C: Prevention Program

Implemented the Program 3 prevention requirements as provided in 40 CFR 68.65 - 68.87? Comments:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> N/A
Prevention Program- Process Safety information [68.65]	

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<p>1. Is the owner or operator compiled written process safety information, which includes information pertaining to the hazards of the regulated substances used or produced by the process, information pertaining to the technology of the process, and information pertaining to the equipment in the process, before conducting any process hazard analysis required by the rule? [68.65(a)]</p> <p><i>At the time of the inspection, the facility has the following MSDS: Oxy Chem - Chlorine, dated 3/15/2006 and Calabrian Corporation - Sulfur Dioxide, dated 5/23/2002.</i></p> <p>Does the process safety information contain the following for hazards of the substances: [68.65(b)]</p> <p><input checked="" type="checkbox"/> a. Toxicity information? [68.65(b)(1)]</p> <p><input checked="" type="checkbox"/> b. Permissible exposure limits? [68.65(b)(2)]</p> <p><input checked="" type="checkbox"/> c. Physical data? [68.65(b)(3)]</p> <p><input checked="" type="checkbox"/> d. Reactivity data? [68.65(b)(4)]</p> <p><input checked="" type="checkbox"/> e. Corrosivity data? [68.65(b)(5)]</p> <p><input checked="" type="checkbox"/> f. Thermal and chemical stability data? [68.65(b)(6)]</p> <p><input checked="" type="checkbox"/> g. Hazardous effects of inadvertent mixing of materials that could foreseeably occur? [68.65(b)(7)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>2. Has the owner documented information pertaining to technology of the process?</p> <p><input checked="" type="checkbox"/> A block flow diagram or simplified process flow diagram? [68.65(c)(1)(i)]</p> <p><i>At the time of the inspection, the facility has diagrams for the CL2/Bleach Vat System and Bleach machine, and for the SO2/Bisulfate System.</i></p> <p><input checked="" type="checkbox"/> Process chemistry? [68.65(c)(1)(ii)]</p> <p><i>At the time of the inspection, the process chemistry was specified on the block flow diagrams.</i></p> <p><input checked="" type="checkbox"/> Maximum intended inventory? [68.65(c)(1)(iii)]</p> <p><input checked="" type="checkbox"/> Safe upper and lower limits for such items as temperatures, pressures, flows, or compositions? [68.65(c)(1)(iv)]</p> <p><i>At the time of the inspection, safe operating limits were specified in the introduction of the explanation of processes, in the block flow diagrams, and in the PHA conducted.</i></p> <p><input type="checkbox"/> An evaluation of the consequences of deviation? [68.65(c)(1)(iv)]</p> <p>Does the process safety information contain the following for the equipment in the process: [68.65(d)(1)]</p> <p><input checked="" type="checkbox"/> Materials of construction? 68.65(d)(1)(i)]</p> <p><input checked="" type="checkbox"/> Piping and instrumentation diagrams [68.65(d)(1)(ii)]</p> <p><input checked="" type="checkbox"/> Electrical classification? [68.65(d)(1)(iii)]</p> <p><input checked="" type="checkbox"/> Relief system design and design basis? [68.65(d)(1)(iv)]</p> <p><input checked="" type="checkbox"/> Ventilation system design? [68.65(d)(1)(v)]</p> <p><input checked="" type="checkbox"/> Design codes and standards employed? [68.65(d)(1)(vi)]</p> <p><input type="checkbox"/> Material and energy balances for processes built after June 21, 1999? [68.65(d)(1)(vii)]-NA</p> <p><input checked="" type="checkbox"/> Safety systems? [68.65(d)(1)(viii)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>3. Has the owner or operator documented that equipment complies with recognized and generally accepted good engineering practices? [68.65(d)(2)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>4. Has the owner or operator determined and documented that existing equipment, designed and constructed in accordance with codes, standards, or practices that are no longer in general use, is designed, maintained, inspected, tested, and operating in a safe manner? [68.65(d)(3)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>Prevention Program- Process Hazard Analysis [68.67]</p>	
<p>5. Has the owner or operator performed an initial process hazard analysis (PHA), and has this analysis identified, evaluated, and controlled the hazards involved in the process? [68.67(a)]</p> <p><i>At the time of the inspection, the original PHA conducted in 2001 was reviewed. In addition, the April 26, 2004 PHA was reviewed. The 2004 PHA did not have any recommendations specified.</i></p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>6. Has the owner or operator determined and documented the priority order for conducting PHAs, and was it based on an appropriate rationale? [68.67(a)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

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<p>7. Does the owner use one or more of the following technologies to conduct process PHA: [68.67(b)]</p> <p><input checked="" type="checkbox"/> What-if? [68.67(b)(1)]</p> <p><input type="checkbox"/> Checklist? [68.67(b)(2)]</p> <p><input type="checkbox"/> What-if/Checklist? [68.67(b)(3)]</p> <p><input checked="" type="checkbox"/> Hazard and Operability Study (HAZOP) [68.67(b)(4)]</p> <p><input type="checkbox"/> Failure Mode and Effects Analysis (FMEA) [68.67(b)(5)]</p> <p><input type="checkbox"/> Fault Tree Analysis? [68.67(b)(6)]</p> <p><input type="checkbox"/> An appropriate equivalent methodology? [68.67(b)(7)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>8. Did the PHA address:</p> <p><input checked="" type="checkbox"/> The hazards of the process? [68.67(c)(1)]</p> <p><input checked="" type="checkbox"/> Identification of any incident which had a likely potential for catastrophic consequences? [68.67(c)(2)]</p> <p><input checked="" type="checkbox"/> Engineering and administrative controls applicable to hazards and interrelationships? [68.67(c)(3)]</p> <p><input checked="" type="checkbox"/> Consequences of failure of engineering and administrative controls? [68.67(c)(4)]</p> <p><input checked="" type="checkbox"/> Stationary source siting? [68.67(c)(5)]</p> <p><input checked="" type="checkbox"/> Human factors? [68.67(c)(6)]</p> <p><input checked="" type="checkbox"/> An evaluation of a range of the possible safety and health effects of failure of controls? [68.67(c)(7)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>9. Was the PHA performed by a team with expertise in engineering and process operations and did the team include appropriate personnel? [68.67(d)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>10. Has the owner or operator established a system to promptly address the team's findings and recommendations; assured that the recommendations are resolved in a timely manner and documented; documented what actions are to be taken; completed actions as soon as possible; developed a written schedule of when these actions are to be completed; and communicated the actions to operating, maintenance, and other employees whose work assignments are in the process and who may be affected by the recommendations? [68.67(e)]</p> <p><i>No recommendations were specified because they have all been addressed.</i></p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>11. Has the PHA been updated and revalidated by a team every five years after the completion of the initial PHA to assure that the PHA is consistent with the current process? [68.67(f)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>12. Has the owner or operator retained PHAs and updates or revalidations for each process covered, as well as the resolution of recommendations for the life of the process? [68.67(g)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>

Prevention Program- Operating procedures [68.69]

<p>13. Has the owner or operator developed and implemented written operating procedures that provides instructions or steps for conducting activities associated with each covered process consistent with the safety information? [68.69(a)]</p> <p><i>At the time of the inspection, the following procedures were reviewed: Repackaging Compressed gasses for chlorine (receiving, evaluating, receiving from Hydro testing, and processing of cylinders), Filling of chlorine cylinders, Chlorine Ton Containers (receiving, processing, filling), Repackaging Sulfur Dioxide (receiving, processing, filling, and disconnection), Sulfur Dioxide ton container original startup, emergency shutdown, emergency operations, and normal shutdown.</i></p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
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<p>1. the procedures address the following: [68.69(a)]</p> <p><input checked="" type="checkbox"/> <u>Steps for each operating phase:</u> [68.69(a)(1)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Initial Startup? [68.69(a)(1)(i)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Normal operations? [68.69(a)(1)(ii)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Temporary operations? [68.69(a)(1)(iii)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Emergency shutdown including the conditions under which emergency shutdown is required, and the assignment of shutdown responsibility to qualified operators to ensure that emergency shutdown is executed in a safe and timely manner? [68.69(a)(1)(iv)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Emergency operations? [68.69(a)(1)(v)]</p> <p><i>At the time of the inspection, emergency operation procedures were available and reviewed, but there is no situation that warrants the use of such operations.</i></p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Normal shutdown? [68.68(a)(1)(vi)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Startup following a turnaround, or after emergency shutdown? [68.69(a)(1)(vii)]</p> <p><input checked="" type="checkbox"/> <u>Operating limits:</u> [68.68(a)(2)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Consequences of deviations [68.69(a)(2)(i)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Steps required to correct or avoid deviation? [68.69(a)(2)(ii)]</p> <p><input checked="" type="checkbox"/> <u>Safety and health considerations:</u> [68.69(a)(3)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Properties of, and physical hazards presented by, the chemicals used in the process [68.69(a)(3)(i)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Precautions necessary to prevent exposure, including engineering controls, administrative controls, and personal protective equipment? [68.69(a)(3)(ii)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Control measures to be taken if physical contact or airborne exposure occurs? [68.69(a)(3)(iii)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Quality control for raw materials and control of hazardous chemical inventory levels? [68.69(a)(3)(iv)]</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any special or unique hazards? [68.69(a)(3)(v)]</p> <p><input checked="" type="checkbox"/> <u>Safety systems and their functions?</u> [68.69(a)(4)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>15. Are operating procedures readily accessible to employees who are involved in a process? [68.69(b)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>16. Is the owner or operator certified annually that the operating procedures are current and accurate and that procedures have been reviewed as often as necessary? [68.69(c)]</p> <p><i>At the time of the inspection, certifications dated 3/6/2006, 3/3/2005, 3/29/2004, 3/6/2003, 3/23/2002, 6/14/2001 and 5/30/2001 were reviewed.</i></p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>17. Has the owner or operator developed and implemented safe work practices to provide for the control of hazards during specific operations, such as lockout/tagout? [68.69(d)]</p> <p><i>At the time of the inspection, lockout/tagout procedures were reviewed.</i></p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>Prevention Program - Training [68.71]</p> <p><i>At the time of the inspection, the owner or operator stated that there are many training programs/classes at the facility. These classes/programs include: monthly safety meetings, first aid, DOT, General Security issues, Plant employee safety, driver safety, office/sales safety training, maintenance safety, SOP's, confined space, material handling, safety, line breaking procedures, welding, respiratory equipment and protection, HAZMAT and PSM/RMP training. The following records were reviewed at the time of the inspection: First Aid/DOT/General Security issues (which included an exam)- 7/31/2006, 6/30/2006, 2005 and 2004; Plant employee safety - 2006, 2005, 2004, Maintenance Safety- to determine if all maintenance personnel are trained; HAZMAT awareness - 6/30/2006, 2005, 2004, 2003, PSM/ RMP training - 8/22/2006 (which also included a written exam).</i></p>	
<p>18. Has each employee involved in operating a process, and each employee before being involved in operating a newly assigned process, been initially trained in an overview of the process and in the operating procedures? [68.71(a)(1)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>19. Did initial training include emphasis on safety and health hazards, emergency operations including shutdown, and safe work practices applicable to the employee's job tasks? [68.71(a)(1)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>20. In lieu of initial training for those employees already involved in operating a process on June 21, 1999, an owner or operator may certify in writing that the employee has the required knowledge, skills, and abilities to safely carry out the duties and responsibilities as specified in the operating procedures [68.71(a)(2)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

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21. Has refresher training been provided at least every three years, or more often if necessary, to each employee involved in operating a process to assure that the employee understands and adheres to the current operating procedures of the process? [68.71(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
22. Has owner or operator ascertained and documented in record that each employee involved in operating a process has received and understood the training required?]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
23. Does the prepared record contain the identity of the employee, the date of the training, and the means used to verify that the employee understood the training? [68.71(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Prevention Program - Mechanical Integrity [68.73]

24. Has the owner or operator established and implemented written procedures to maintain the on-going integrity of the process equipment listed in 68.73(a)? [68.73(b)] <i>At the time of the inspection, mechanical integrity procedures were reviewed, dated 10/29/2001. In addition, the owner or operator stated that scales are checked daily with an empty cylinder and that the facility performs daily inspections of the plant and produces both weekly and monthly reports. The mechanical integrity procedures included the following equipment: actuated valves, manual valves, whips and transfer hoses, gauges, electric motors, pumps, tanks, heat exchangers, expansion chambers, bleach machine, bleach filter, air filter, scrubbers, bead blasters, valve machine, air horn, air tank, vacuum alarm system, gas detection system, cat control system, and scale shutdown system. The following records were reviewed at the time of the inspection: Equipment Disposition Forms - 8/05-4/05 and 9/04-1/04, Maintenance Project Master List 2006, 2005, and 2004, Daily PM Inspections 2005 and 2004, Daily Compressor Check Sheet - 7/20006, Chiller Checklist/Pimp Mechanical Seal Check/Misc. Equipment 6/2006-1/2006., Weekly PM Inspections for 2006, 2005, and 2004, Monthly PM's - 8/2006,7/2006,6/2006,2/2006,1/2006, 2005 and 2004, Daily Mitigation Systems 8/23/2006, and 2005, Dem Point Monitor - 1/1999,2/2003.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
25. Has the owner or operator trained each employee involved in maintaining the on-going integrity of process equipment? [68.73(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
26. Performed inspections and tests on process equipment? [68.73(d)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
27. Followed recognized and generally accepted good engineering practices for inspections and testing procedures? [68.73(d)(2)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
28. Ensured the frequency of inspections and tests of process equipment is consistent with applicable manufacturers' recommendations, good engineering practices, and prior operating experience? [68.73(d)(3)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
29. Documented each inspection and test that had been performed on process equipment, which identifies the date of the inspection or test, the name of the person who performed the inspection or test, the serial number or other identifier of the equipment on which the inspection or test was performed, a description of the inspection or test performed, and the results of the inspection or test? [68.73(d)(4)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
30. Corrected deficiencies in equipment that were outside acceptable limits defined by the process safety information before further use or in a safe and timely manner when necessary means were taken to assure safe operation? [68.73(e)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
31. Assured that equipment as it was fabricated is suitable for the process application for which it will be used in the construction of new plants and equipment? [68.73(f)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
32. Performed appropriate checks and inspections to assure that equipment was installed properly and consistent with design specifications and the manufacturer's instructions? [68.73(f)(2)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
33. Assured that maintenance materials, spare parts and equipment were suitable for the process application for which they would be used? [68.73(f)(3)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Prevention Program - Management Of Change [68.75]

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<p>3. Has the owner or operator established and implemented written procedures to manage changes to process chemicals, technology, equipment, and procedures, and changes to stationary sources that affect a covered process? [68.75(a)]</p> <p><i>At the time of the inspection, MOC procedures were reviewed. MOC procedures were followed and documented in 1998, 1999, 2003. The owner or operator must remember to date all its MOC's.</i></p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>35. Do procedures assure that the following considerations are addressed prior to any change: [68.75(b)]</p> <p><input checked="" type="checkbox"/> The technical basis for the proposed change? [68.75(b)(1)]</p> <p><input checked="" type="checkbox"/> Impact of change on safety and health? [68.75(b)(2)]</p> <p><input checked="" type="checkbox"/> Modifications to operating procedures? [68.75(b)(3)]</p> <p><input checked="" type="checkbox"/> Necessary time period for the change? [68.75(b)(4)]</p> <p><input checked="" type="checkbox"/> Authorization requirements for the proposed change? [68.75(b)(5)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>36. Were employees, involved in operating a process and maintenance, and contract employees, whose job tasks would be affected by a change in the process, informed of, and trained in, the change prior to start-up of the process or affected parts of the process? [68.75(c)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>37. If a change resulted in a change in the process safety information, was such information updated accordingly? [68.75(d)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>38. If a change resulted in a change in the operating procedures or practices, had such procedures or practices been updated accordingly? [68.75(e)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>Prevention Program - Pre-startup Safety Review [68.77]</p>	
<p>39. Did the pre-startup safety review confirm that prior to the introduction of a regulated substance to a process: [68.77(b)]</p> <p><i>Completed a PSSR for the 1999 installation of the bleach machine.</i></p> <p><input checked="" type="checkbox"/> Construction and equipment was in accordance with design specifications? [68.77(b)(1)]</p> <p><input checked="" type="checkbox"/> Safety, operating, maintenance, and emergency procedures were in place and were adequate? [68.77(b)(2)]</p> <p><input checked="" type="checkbox"/> For new stationary sources, a process hazard analysis had been performed and recommendations had been resolved or implemented before startup? [68.77(b)(3)]</p> <p><input checked="" type="checkbox"/> Modified stationary sources meet the requirements contained in management of change? [68.77(b)(3)]</p> <p><input checked="" type="checkbox"/> Training of each employee involved in operating a process had been completed? [68.77(b)(4)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>Prevention Program - Compliance audits [68.79]</p>	
<p>1. Has the owner or operator certified that the stationary source has evaluated compliance with the provisions of the prevention program at least every three years to verify that the developed procedures and practices are adequate and being followed? [68.79(a)]</p> <p><i>At the time of the inspection, the 5/22/2001, 2/14/2002, and 1/18/2005 audits were reviewed. The most recent audit did not identify any deficiencies that needed to be addressed.</i></p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>2. Has the audit been conducted by at least one person knowledgeable in the process? [68.79(b)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>3. Are the audit findings documented in a report? [68.79(c)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>4. Has the owner or operator promptly determined and documented an appropriate response to each of the findings of the audit and documented that deficiencies had been corrected? [68.79(d)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>5. Has the owner or operator retained the two most recent compliance reports? [68.79(e)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>Prevention Program - Incident investigation [68.81]</p>	

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1. s the owner or operator investigated each incident which resulted in, or could reasonably have resulted in a catastrophic release of a regulated substance? [68.81(a)] <i>At the time of the inspection, a Spill, Leaks, & release report were reviewed. Also at the time of the inspection, the owner or operator stated that the operators check for leaks on a daily walk through basis. A 4/2002 incident reported on the facilities submitted RMP identified a release in secondary containment. This release does not have to be reported on the RMP because it does not involve the RMP processes identified.</i>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
2. Were all incident investigations initiated not later than 48 hours following the incident? [68.81(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
3. Was an accident investigation team established and did it consist of at least one person knowledgeable in the process involved, including a contract employee if the incident involved work of a contractor, and other persons with appropriate knowledge and experience to thoroughly investigate and analyze the incident? [68.81(c)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
4. Was a report prepared at the conclusion of every investigation?[68.81(d)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
5. Does every report include: [68.81(d)] <input type="checkbox"/> Date of incident? [68.81(d)(1)] <input type="checkbox"/> Date investigation began? [68.81(d)(2)] <input type="checkbox"/> A description of the incident? [68.81(d)(3)] <input type="checkbox"/> The factors that contributed to the incident? [68.81(d)(4)] <input type="checkbox"/> Any recommendations resulting from the investigation? [68.81(d)(5)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
6. Has the owner or operator established a system to address and resolve the report findings and recommendations, and are the resolutions and corrective actions documented? [68.81(e)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
7. Was the report reviewed with all affected personnel whose job tasks are relevant to the incident findings including contract employees where applicable? [68.81(f)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
8. Was the owner or operator retained the incident investigation reports for five years? [68.81(g)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Section D - Employee Participation [68.83]	
1. Has the owner or operator developed a written plan of action regarding the implementation of the employee participation required by this section?[68.83(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
2. Has the owner or operator consulted with employees and their representatives on the conduct and development of process hazards analyses and on the development of the other elements of process safety management in chemical accident prevention provisions? [68.83(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Has the owner or operator provided to employees and their representatives access to process hazards analyses and to all other information required to be developed under the chemical accident prevention rule? [68.83(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Section E - Hot Work Permit [68.85]	
1. Has the owner or operator issued a hot work permit for each hot work operation conducted on or near a covered process? [68.85(a)] <i>At the time of the inspection, procedures dated 3/1999 were reviewed. Also reviewed at the time of the inspection, were hot work permits issued on 8/12-14/2006 for the making of a 4 cylinder rack and on 3/28-31/2006 for a torch hole in a ton cylinder. The owner or operator should make sure that all hot work permits are signed off accordingly.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
2. Does the permit document that the fire prevention and protection requirements in 29CFR 1910.252(a) have been implemented prior to beginning the hot work operations? [68.85(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Does the permit indicate the date(s) authorized for hot work and the object(s) upon which hot work is to be performed? [68.85(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Are the permits being kept on file until completion of the hot work operations? [68.85(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

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Program Level 3 Process Checklist

Facility Name: JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

S. F - Contractors [68.87]	
1. Has the owner or operator obtained and evaluated information regarding the contract owner or operator's safety performance and programs when selecting a contractor? [68.87(b)(1)] <i>At the time of the inspection, it was identified that Powell Fabrications and Manuf., Inc. and Peck Electric are primary contractors at the facility. Contractor procedures were reviewed. Safety information regarding Powell Fabrication and Manuf., Inc. was available at the time of the inspection, safety information regarding Peck Electric was not available at the time of the inspection. The owner or operator must maintain documentation, according to its procedures, for all contractors working on site.</i>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A
2. Informed contract owner or operator of the known potential fire, explosion, or toxic release hazards related to the contractor's work and the process? [68.87(b)(2)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Explained to the contract owner or operator the applicable provisions of the emergency response or the emergency action program? [68.87(b)(3)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Developed and implemented safe work practices consistent with §68.69(d), to control the entrance, presence, and exit of the contract owner or operator and contract employees in the covered process areas? [68.87(b)(4)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Section G - Emergency Response [68.90 - 68.95]

Developed and implemented an emergency response program as provided in 40 CFR 68.90-68.95? ☒ S ☐ M ☐ U ☐ N/A
Comments: *At the time of the inspection, the owner or operator stated the facility is a first responder and has a Contingency Plan on site. There are 4 people HAZMAT trained, if not enough people are available, then the facility relies on local responders. The Contingency Plan was last revised on 6/29/2006. The facility relies on ChemTrec/Chlorep for assistance also. On site, the facility has the following emergency equipment: 2 full face canisters, 4 full face positive pressures, 4 total encapsulated suits, 5 chlorine safety kits, 1 chlorine cylinder recovery vessel, gloves, boots, face shields. The monthly Safety Equipment Checklist was reviewed for all months 6/2006-2/2004. In addition, the Respirator Equipment Inspection checklists were reviewed for respirator 791820 (6/2006 and 8/2006) and for respirator 5 (2/2006, 3/2006, 5/2006, 6/2006). Safety Equipment Checklists for Eyewash showers and A, B, and C kits were reviewed for 8/2006, 6/2006, 4/2006, 5/2006, 3/2006, 2/2006, 1/2006, and 12/2006. In addition for the years 2004 and 2003. Also, SCBA Inspection Checklists of all 4 SCBA's were reviewed and dated 8/2006, 6/2006, 5/2006, 4/2006, 3/2006, 1/2006, and for years 2006, 2004 and 12/2003.*

1. Is the facility designated as a "first/responder" in case of an accidental release of regulated substances?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
1.a. If the facility is not a first responder:	
1.a.(1) For stationary sources with any regulated substances held in a process above threshold quantities, is the source included in the community emergency response plan developed under 42 U.S.C. 11003? [68.90(b)(1)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
1.a.(2) For stationary sources with only regulated flammable substances held in a process above threshold quantities, has the owner or operator coordinated response actions with the local fire department? [68.90(b)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
1.a.(3) Are appropriate mechanisms in place to notify emergency responders when there is need for a response? [68.90(b)(3)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
2. An emergency response plan which is maintained at the stationary source and contains the following? [68.95(a)(1)] <input checked="" type="checkbox"/> a. Procedures for informing the public and local emergency response agencies about accidental releases? [68.95(a)(1)(i)] <input checked="" type="checkbox"/> b. Documentation of proper first-aid and emergency medical treatment necessary to treat accidental human exposures? [68.95(a)(1)(ii)] <input checked="" type="checkbox"/> c. Procedures and measures for emergency response after an accidental release of a regulated substance? [68.95(a)(1)(iii)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Procedures for the use of emergency response equipment and for its inspection, testing, and maintenance? [68.95(a)(2)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Training for all employees in relevant procedures? [68.95(a)(3)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

Program Level 3 Process Checklist

Facility Name: JCI Jones Chemicals, In., 1800 Payne Ave., Riverview, MI 48192

<p>5. Procedures to review and update, as appropriate, the emergency response plan to reflect changes at the stationary source and ensure that employees are informed of changes? [68.95(a)(4)]</p> <p><i>At the time of the inspection, procedures dated 6/29/2006 were reviewed. The facility should maintain a log of when procedures were reviewed and updated.</i></p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>6. Did the owner or operator use a written plan that complies with other Federal contingency plan regulations or is consistent with the approach in the National Response Team's Integrated Contingency Plan Guidance ("One Plan")? If so, does the plan include the elements provided in paragraph (a) of 68.95, and also complies with paragraph (c) of 68.95? [68.95(b)]</p>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
<p>7. Has the emergency response plan been coordinated with the community emergency response plan developed under EPCRA? [68.95(c)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Section H - Risk Management Plan [68.190 - 68.195]

<p>1. Has the owner or operator reviewed and updated the RMP and submitted it to EPA [68.190(a)]? Reason for update.</p> <p><input checked="" type="checkbox"/> Five-year update. [68.190(b)(1)]</p> <p><input type="checkbox"/> Within three years of a newly regulated substance listing. [68.190(b)(2)]</p> <p><input type="checkbox"/> At the time a new regulated substance is first present in an already regulated process above threshold quantities. [68.190(b)(3)]</p> <p><input type="checkbox"/> At the time a regulated substance is first present in a new process above threshold quantities. [68.190(b)(4)]</p> <p><input type="checkbox"/> Within six months of a change requiring revised PHA or hazard review. [68.190(b)(5)]</p> <p><input type="checkbox"/> Within six months of a change requiring a revised OCA as provided in 68.36. [68.190(b)(6)]</p> <p><input type="checkbox"/> Within six months of a change that alters the Program level that applies to any covered process. [68.190(b)(7)]</p>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
<p>2. If the owner or operator experienced an accidental release that met the five-year accident history reporting criteria (as described at 68.42) subsequent to April 9, 2004, did the owner or operator submit the information required at 68.168, 68.170(j) and 68.175(l) within six months of the release or by the time the RMP was updated as required at 68.190, whichever was earlier. [68.195(a)]</p>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
<p>3. If the emergency contact information required at 68.160(b)(6) has changed since June 21, 2004, did the owner or operator submit corrected information within thirty days of the change? [68.195(b)]</p> <p><i>Tim Venier is no longer the emergency contact, this information should be corrected within 30 days of this change.</i></p>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A

ATTACHMENT1**PHOTOGRAPHS****SUBJECT**

90 ton chlorine railcar transfer station, current tanker being used.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERACannon EOS Digital
Rebel**FILM**

Digital

PHOTOGRAPH NO.

1



ATTACHMENT2**PHOTOGRAPHS****SUBJECT**

Chlorine ton cylinder indoor filling station.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

2



ATTACHMENT3**PHOTOGRAPHS****SUBJECT**

Process piping and connection for Chlorine ton cylinder being filled.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

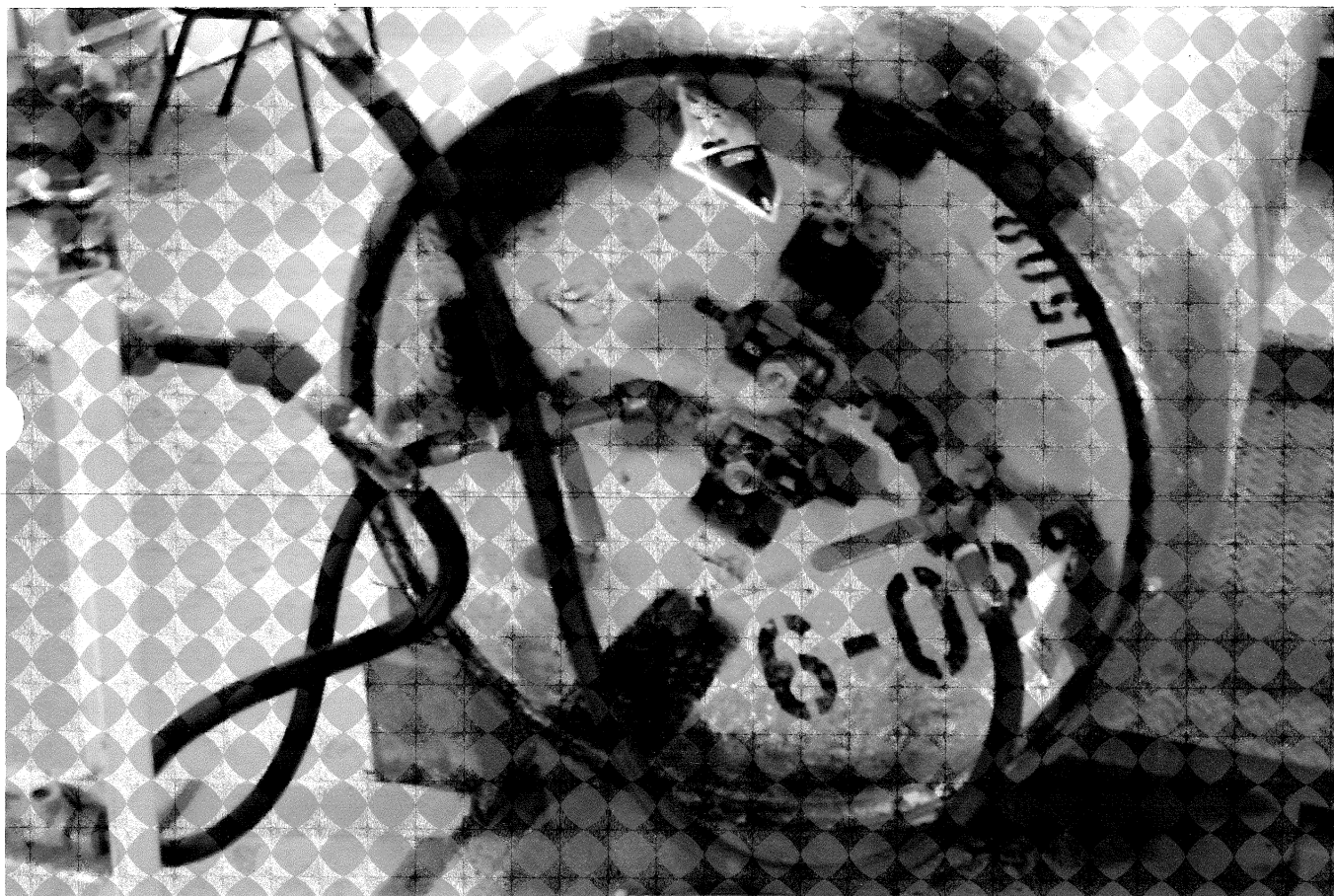
Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

3



ATTACHMENT4**PHOTOGRAPHS****SUBJECT**

Sulfur Dioxide 150-lb. cylinder storage area.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

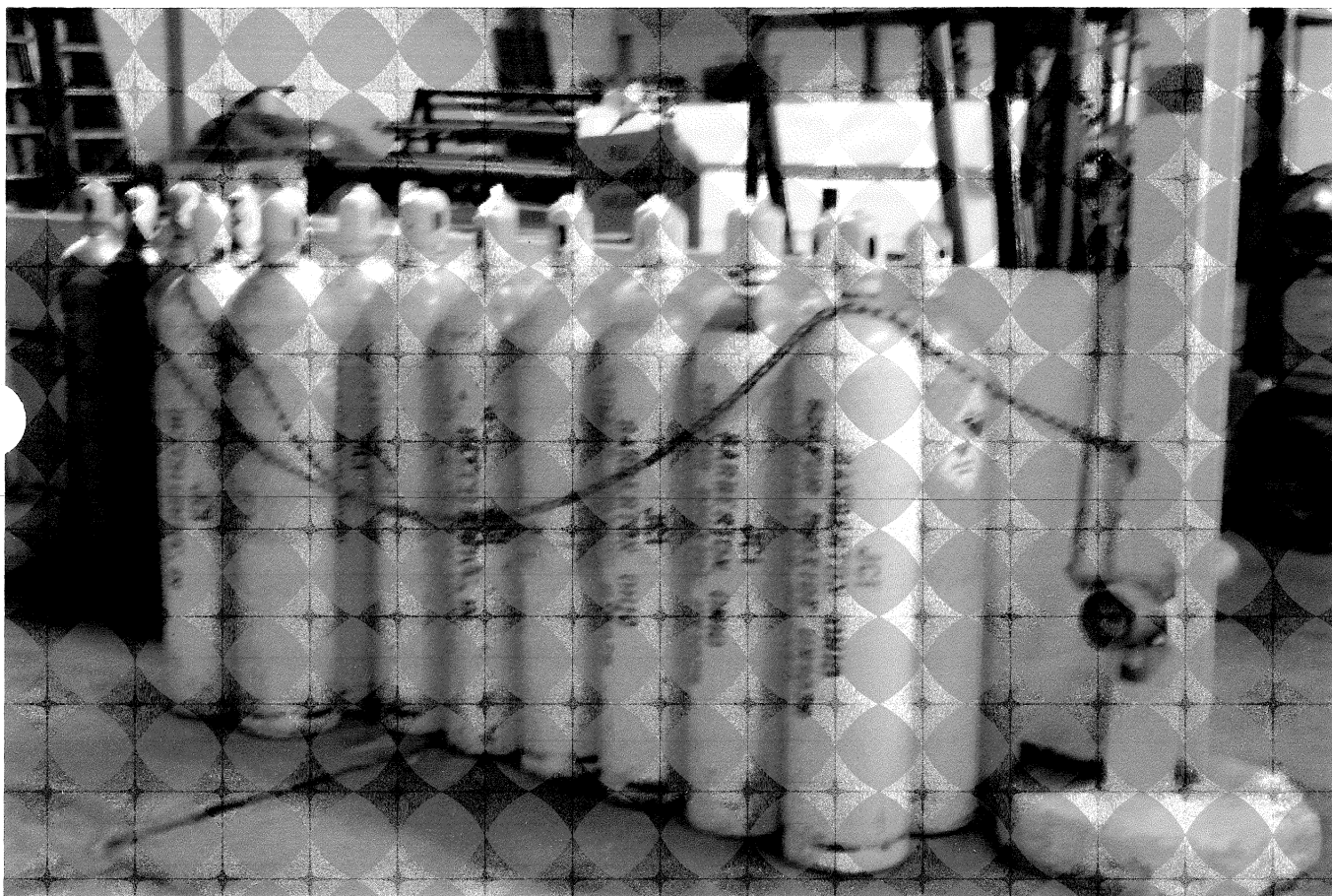
Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

4



ATTACHMENT5
PHOTOGRAPHS

SUBJECT

Chlorine, 150-lb. cylinder, filling station.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

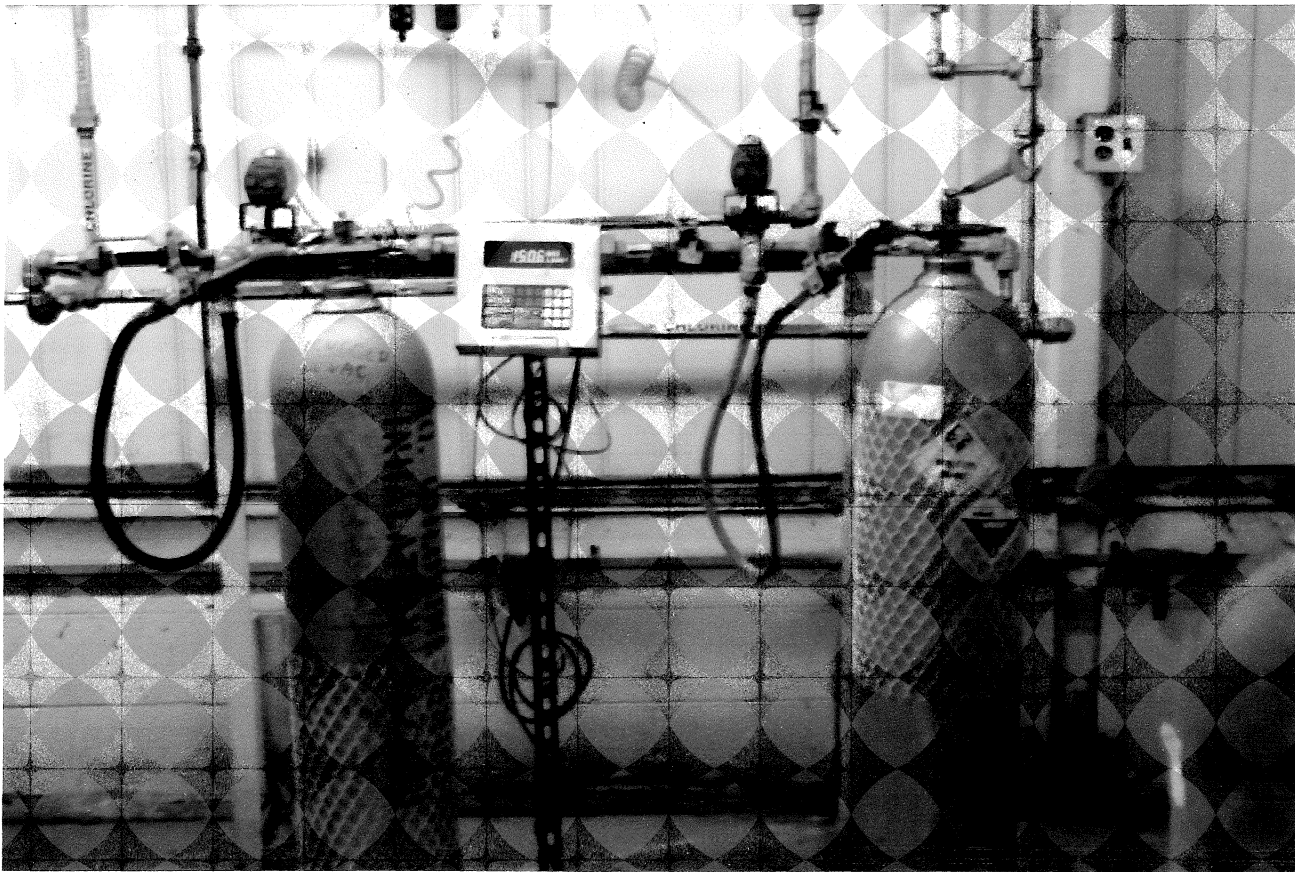
Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

5



ATTACHMENT6**PHOTOGRAPHS****SUBJECT**

Chlorine, 150-lb. cylinder, currently being filled. Notice the scale measurement of 150.6 lbs.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

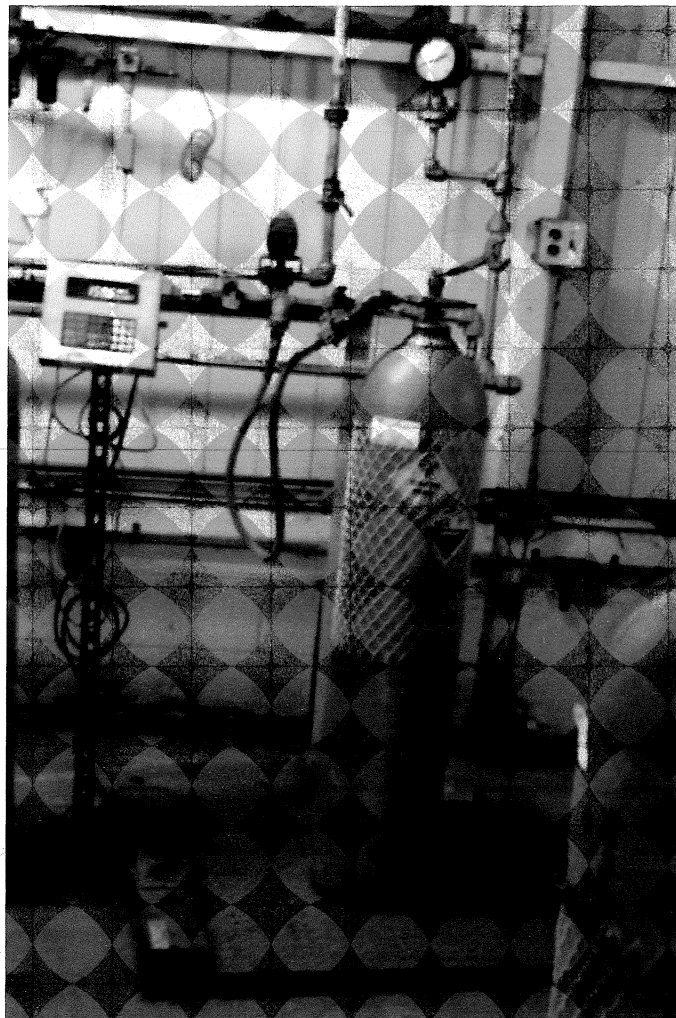
Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

6



ATTACHMENT7**PHOTOGRAPHS****SUBJECT**

Chlorine, 150-lb. cylinder, storage area.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

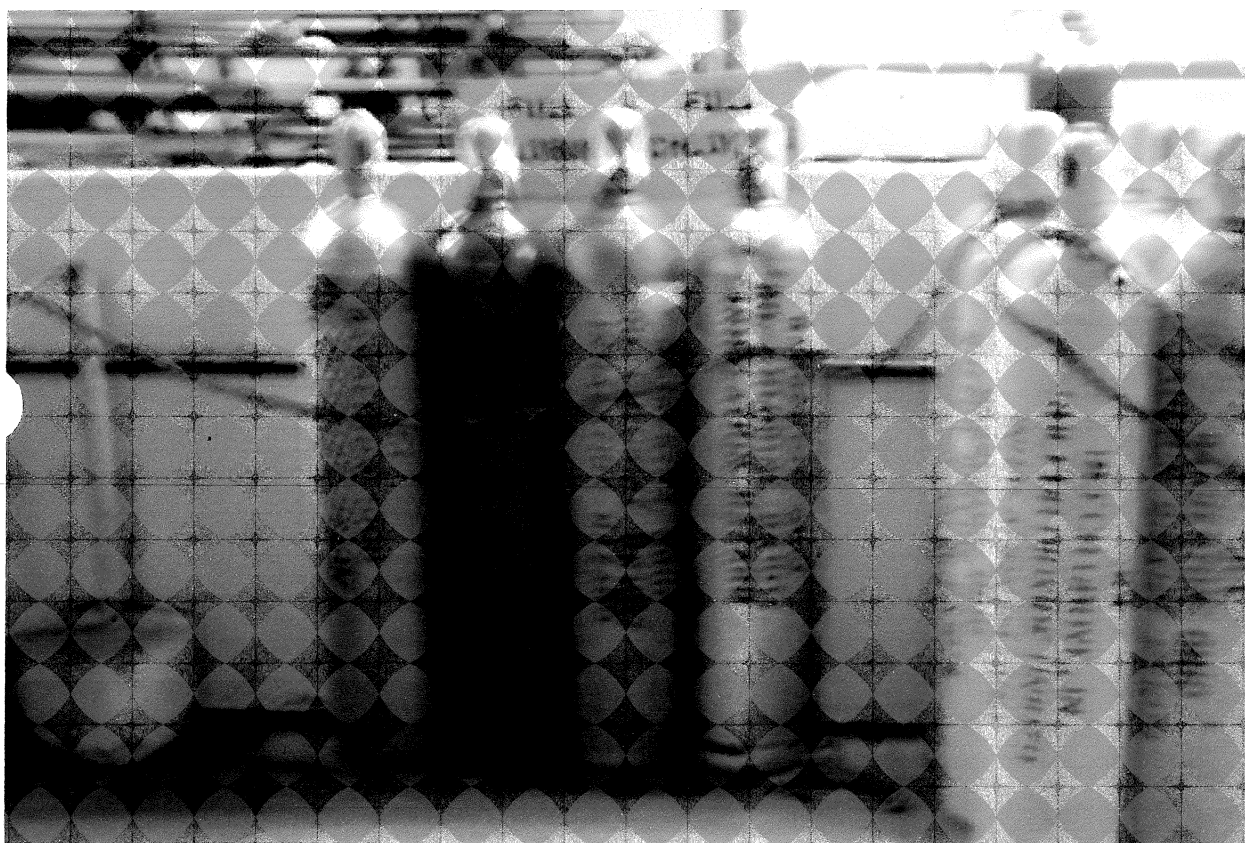
Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

7



ATTACHMENT8**PHOTOGRAPHS****SUBJECT**

Chlorine, ton cylinder, storage area.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

8



ATTACHMENT9**PHOTOGRAPHS****SUBJECT**

Sulfur Dioxide, ton cylinder, storage area.

FACILITY

JCI Jones Chemicals, Inc., 1800 Payne Ave., Riverview, MI 48192

PHOTOGRAPHER

Monika Chrzaszcz

WITNESSES

Donald Shelc

DATE

August 23, 2006

TIME

9:30 am

CAMERA

Canon EOS Digital Rebel

FILM

Digital

PHOTOGRAPH NO.

9

